



HAWAII STATE ETHICS COMMISSION  
1001 BISHOP STREET, ASB TOWER 970  
P.O. BOX 616, HONOLULU, HAWAII 96809  
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STATE OF HAWAII  
STATE ETHICS COMMISSION

## LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

<b>PART I LOBBYIST</b>			
NAME(Last)	(First)	(Middle)	TELEPHONE
Urquhart	Robert	H.	548-3714
MAILING ADDRESS (Street)			FAX
P. O. Box 898900			548-6662
(City)	(State)	(Zip Code)	
Mililani	Hawaii	96789-8900	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Castle & Cooke Properties, Inc.			548-4811
MAILING ADDRESS (Street)			FAX
100 Kahelu Avenue			548-6662
(City)	(State)	(Zip Code)	
Mililani	Hawaii	96789	

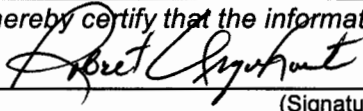
<b>PART II ORGANIZATION</b>			
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)			TELEPHONE
Castle & Cooke Properties, Inc.			548-4811
MAILING ADDRESS (Street)			FAX
100 Kahelu Avenue			548-6662
(City)	(State)	(Zip Code)	
Mililani	Hawaii	96789	
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT			TELEPHONE
Harry A. Saunders			548-4863
MAILING ADDRESS (Street)			FAX
P.O. Box 898900			548-2975
(City)	(State)	(Zip Code)	
Mililani, HI	96789		

**PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY**

Agriculture	Education	Human Services	Science, Technology & Economic Development
Communications & Public Utilities	Government Operations & Finance	Intergovernmental Relations, International Affairs	<u>Tourism &amp; Recreation</u>
Consumer Protection & Commerce	Hawaiian Affairs	Labor & Employment	Transportation
Culture, Arts, Historic Preservation	Health	<u>Planning, Land &amp; Water Use Management</u>	Other: (indicate below)
Ecology, Energy Environmental Protection	Housing	Public Safety & Corrections	_____

**PART IV CERTIFICATION OF LOBBYIST**

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

12.30.04

(Date)

**PART V AUTHORIZATION TO LOBBY**

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Harry A. Saunders	President

NAME OF ORGANIZATION (if applicable)	TELEPHONE
Castle & Cooke Properties, Inc.	548-4811

MAILING ADDRESS (Street)

P.O. Box 898900

FAX

548-2975

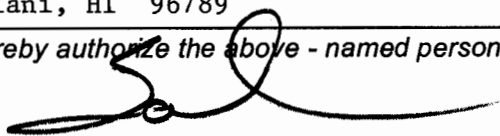
(City)

(State)

(Zip Code)

Mililani, HI 96789

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

12/30/04

(Date)